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ANNUAL REPORT OF THE ADMINISTRATOR FOR 1990 AND PROGRAMME-LEVEL ACTIVITIES

The role of UNDP in combating AIDS and HIV

Note by the Administrator

SUMMARY

The present report is presented to the Governing Council in response to its decision 90/25 of 22 June 1990, which called upon the United Nations Development Programme (UNDP) to mobilize the human and financial resources necessary to continue supporting the global fight against the pandemic. UNDP was also requested to pay particular attention to prevention, care and support programmes for women and urged to collaborate closely with appropriate bilateral and United Nations agencies in promoting greater awareness and understanding of the socio-economic implications of the pandemic.

The report discusses the unfolding of the HIV/AIDS pandemic and its implications for development, highlighting the ongoing and planned activities of UNDP in health- and development-related sectors, with particular emphasis on capacity-building to strengthen the response of UNDP and Governments to the pandemic.

INTRODUCTION

1. In its decision 90/25 of 22 June 1990, the Governing Council called upon UNDP to mobilize the necessary resources, both human and financial, to continue its active support to the global fight against the human immunodeficiency virus (HIV) and the disease known as acquired immunodeficiency syndrome (AIDS) within the framework of the World Health Organization (WHO)/UNDP Alliance to Combat Aids. UNDP was also called upon to pay particular attention to prevention, care and support programmes for women. Furthermore, UNDP was urged to collaborate closely with appropriate bilateral and United Nations agencies in supporting greater awareness and understanding of the socio-economic impact of the pandemic.

2. The changes brought on the world by HIV/AIDS during the last decade will deepen and widen over the next decade. Already, approximately one in four hundred of all adults in the world are infected. As of late 1990, WHO estimates that at least 8-10 million HIV infections in adults have occurred worldwide. WHO projections indicate that in 10 years there may be a total of 25-30 million HIV-infected persons. An increasing proportion of all new infection is occurring in developing countries: 65-70 per cent now; 75-80 per cent by the year 2000. An increasing proportion of adults becoming infected are women; at present approximately one third, within the next 10 years, at least 50 per cent. Increasing numbers of infants are being infected and children left without parents. The majority of all infected adults are in the 15 to 40 age group, the most economically and socially active group.

3. National HIV/AIDS programmes have been established within the ministries of health in most developing countries. Initially, programmes focused on the establishment of prevention and surveillance activities. However, in countries where the pandemic has already deepened, a spectrum of responses is emerging: from prevention to care, support and treatment programmes, to programmes of assistance to those left after the death of a family member, through to programmes addressing broader social and economic implications of the pandemic. These broader socio-economic issues include, for example, the depletion of the labour force and of the military, the potential impact on the productive sectors of the economy (agriculture, mining, industry, transport, etc.), on the social sectors (health and education) and on families and communities. The narrowing of the tax base, the worsening of poverty already exacerbated by a worsening global economic climate, including the impact of structural adjustment in many countries, increasing homelessness and social and political unrest are all potential longer-term consequences. The challenges posed by the ever-increasing threat of HIV/AIDS calls for concerted and aggressive action by UNDP and its development partners to minimize this threat to development.

I. UNDP RESPONSES TO DATE

4. UNDP continues to provide support at the country and intercountry levels for prevention and care programmes within the framework of the WHO/UNDP Alliance to Combat AIDS (the Alliance) signed by the Director-General of WHO and the Administrator on 29 March 1988 and re-endorsed by the Governing Council at its

thirty-seventh session (1990). UNDP areas of responsibility within the Alliance include: strengthening the capacity of Governments in the co-ordination of donor activities and in the mobilization of external resources; assisting in the development of a multisectoral response to the pandemic, drawing upon a wide range of expertise, including non-governmental organizations (NGOs), experts and the affected community and assistance to Governments in HIV-related national capacity-building, institutional-strengthening and human resource development. Approximately $30 million in national indicative planning figures (IPFs) has now been committed, largely through the World Health Organization/Global Programme on Aids (WHO/GPA), to support national HIV/AIDS prevention and control programmes and projects. At the global level, UNDP continues to provide direct support to WHO/GPA and to the Global Blood Safety Initiative, which is working actively to minimize the spread of HIV through blood. UNDP field offices also continue to provide administrative, financial and logistical support to WHO/GPA at the country level, as required. In many instances, the United Nations Fund for Population Activities (UNFPA) has provided complementary assistance to support such activities.

5. UNDP is actively consulting with a wide range of partners, including WHO/GPA, WHO regional offices, the United Nations Children's Fund (UNICEF), UNFPA, the Department of International Economic and Social Affairs (DIESA), other organs and agencies of the United Nations system, member Governments, financial institutions such as the World Bank, NGOs and experts from a wide range of disciplines to determine how best to support countries in policy formulation and programme development and delivery linked to the socio-economic impact of HIV/AIDS. In response to the Governing Council mandate on this subject, the Regional Bureau for Africa (RBA) has set in motion an action programme which includes consultation with Ministers of Planning in Africa on the enormity and magnitude of the problem. Resident Representatives in Africa have been requested to give full support to Governments in elaborating HIV/AIDS programmes in development-related sectors and to encourage the establishment of national HIV/AIDS commissions at the highest level in Government. In Uganda, the National Commission has been established in the office of the Prime Minister and UNDP has joined with other partners, including WHO and the World Bank, to support the Government in the formulation of a national, multisectoral strategy to combat HIV/AIDS. RBA is formulating an intercountry programme initially targeting countries most affected by HIV/AIDS. This programme will provide Governments and community-based groups with training in programme formulation, support for the development of HIV/AIDS policies and implementation strategies, promote donor collaboration and assist with the mobilization of additional human and financial resources.

6. An intercountry programme of the Regional Bureau for Asia and the Pacific (RBAP) has been approved; it will facilitate the organization of a series of country and intercountry workshops leading to a major, region-wide seminar addressing the socio-economic aspects of the pandemic. Target groups include policy-makers, national and regional institutions, community-based groups, private sector and other United Nations agencies.

7. The pandemic requires a range of initiatives involving the support of both public and private agencies and the affected communities themselves. There is a

growing recognition of the value and need for community-oriented prevention, support and care programmes, including home-based care strategies, small group counselling, prevention and support efforts at the local level and increased attention to issues related to the needs of women and children. Programme development missions with a focus on community-based groups have been undertaken in Malawi, Rwanda, Zambia and Thailand by the United Nations Volunteers (UNV) programme. This has resulted in the elaboration of national programmes to strengthen community capacity to cope with the impact of the pandemic through the development of sustainable systems of support to families and communities, utilizing a multisectoral teamwork approach. Drawing on this experience, a programming strategy for the use of United Nations volunteers in the response to the pandemic has been developed. Following an innovative programme in Rwanda to minimize iatrogenic and occupational HIV transmission through unscreened blood, the United Nations Capital Development Fund (UNCDF) fielded an identification mission to Uganda, where NGOs and community-based organizations have been invited to be fully involved in the design and implementation of the planned programme.

8. In addition to carrying out its responsibilities under the Alliance, UNDP is a member of the GPA Management Committee; a member of the United Nations Steering Committee on AIDS (convened by the Under-Secretary-General for International Economic and Social Affairs) and serves as convenor of its subsidiary body, the United Nations Standing Committee on Aids; actively participates in the WHO/GPA inter-agency Advisory Group on AIDS; and, on the initiative of the Administrator, has played a prominent role in many countries on World AIDS Day (1 December), which in 1990 focused world attention on HIV/AIDS and women. UNDP has also actively participated in several international forums, including the Conference on HIV/AIDS in Asia and the Pacific in Canberra 5-8 August 1990; the Fifth International Conference on AIDS in Africa, held in Kinshasa, Zaire, in October 1990; the International Conference of AIDS-related NGOs and Community Organizations, held in Paris from 31 October to 5 November, as well as numerous other national and regional conferences under the sponsorship of governmental organizations and NGOs.

9. In recognition of the importance of HIV/AIDS for development, the Administrator has appointed a senior UNDP staff member as Policy Adviser on HIV/AIDS and Development. Steps have also been taken to review staffing requirements at headquarters and in field offices to strengthen UNDP capacity to implement its mandate effectively in this area. Within UNDP headquarters, and in an increasing number of field offices, senior staff serve as focal points for HIV/AIDS. Special Programme Resources (SPR) have also been earmarked to undertake HIV/AIDS programme activities.

II. NATIONAL CAPACITY-BUILDING

10. In recognition of the wider developmental dimension of the pandemic, the Governing Council has given UNDP specific mandates within the general context of social and economic development: to increase understanding of the potential development implications of the pandemic, to strengthen national capacity to respond to support community-based programmes and to assist prevention, care and treatment programmes for women.

11. An initial but critical step has been taken to strengthen the capacity of UNDP and Governments to respond to the development implications of the pandemic. An interregional programme, with co-funding from the Governments of the Netherlands and Norway, was approved in August 1990. Additional support from other donors is being explored. Activities include the preparation of a UNDP policy paper, programming guidelines and an HIV/AIDS and development training programme developed in close cooperation with all Regional Bureaux. The Division of Global and Interregional Programmes (DGIP) coordinates this programme in full consultation with the UNDP Policy Adviser on HIV/AIDS and Development.

12. In dealing with programming for the HIV/AIDS pandemic, development professionals and Governments find themselves facing a highly complex phenomenon. Since there exists no international technical agency dealing with all of the developmental aspects of the HIV/AIDS pandemic, more and more demands will be made on UNDP. Knowledge and programming tools will be needed to respond more effectively to the multidimensional development aspects of the impact of HIV/AIDS. To this end, work has started on the preparation of an HIV/AIDS policies and programming handbook as a complement to a field-based training programme being designed for UNDP, United Nations agency and government counterpart personnel. The training programme includes an in-country orientation session for NGOs and community-based groups. In consultation with the Regional Bureaux a pilot training programme has been prepared to be offered upon request in six African countries and in two countries in other regions from mid to late 1991. This pilot training experience will serve as the basis for a training model on HIV/AIDS and development that can be offered in field offices around the world.

13. UNDP has also initiated studies on issues affecting prevention, care and treatment programmes for women. The issues surrounding HIV/AIDS and women are complex. Effective interventions must mobilize all sectors of society, including individuals, women and men, families, organizations and Governments. As more and more women become infected, and as the burden of care of the sick and the dying increases, women's time will be drawn away from other tasks. The impact of this on their families, on communities and on the productive sectors of the economy is as yet incalculable. Effective and innovative action is needed to change the social status and economic dependency of women to enable them to take steps to protect themselves and their children from the effects of HIV infection. The Division for Women in Development is therefore preparing a gender-sensitive strategy, which will be incorporated into overall response of UNDP to the pandemic.

14. Preparatory work has begun to set up a database at UNDP headquarters on studies related to the socio-economic impact of the pandemic. These initiatives will provide inputs for programming support to Governments to strengthen their capacity to forecast, plan and implement programmes to lessen the future impact of the pandemic.

III. FUTURE DIRECTIONS

15. UNDP is taking the lead, in consultation with multilateral and bilateral donors, to determine appropriate means of ensuring donor coordination and collaboration at the country, regional and global levels in the area of HIV/AIDS and development. As multisectoral national HIV/AIDS programmes become established, the primary focus of UNDP assistance will evolve and increasingly be directed towards the development implications of the pandemic. The strategies will vary, depending on the stage of the pandemic in a region, country or community. Assistance will be provided on HIV/AIDS policy development and for strengthening community-based organizations. Some of the programmes will focus on the development of multisectoral strategies and their implementation structures. Others will concentrate on the immediate need to create a widespread awareness of the development dimensions of the pandemic and to plan for them, as well as the strengthening and expansion of community-based organizations. Future areas where support might be provided to WHO/GPA at the country, interregional and global levels are under discussion. These issues will be addressed in fifth programming cycle country, regional and interregional programmes.

16. HIV/AIDS is a global phenomenon and therefore must continue to be approached from a global perspective with broad strategic objectives. UNDP therefore recognizes the importance of the WHO Global Strategy for AIDS as a framework for ensuring a coordinated response at the country, regional and global levels. As the growing threat of HIV/AIDS results in greater awareness and understanding of the development dimensions of the pandemic, policy directives on the development implications will be required to enhance UNDP capacity to carry out its mandate effectively in collaboration with other partners in a coordinated manner. UNDP therefore intends to present to the Governing Council for discussion at its thirty-eighth session a policy paper on HIV/AIDS and development.